

SOMERS YACHT CLUB INC.

PO Box 129

SOMERS VICTORIA 3927

Welcome to Somers Yacht Club.

Please complete the application form and either text, email or post it to the membership secretary. The completed form can also be given to a General Committee Member or Somers Yacht Club member to be passed on to the membership secretary.

Once your application has been received and approved by the General Committee, you will receive a confirmation of membership via email.

Please complete the following

Your Full Name:		Date of application	
Email address:			
our address:			
our Phone Number:			_ Your Date of Birth
To be	e completed by	an adult mem	ber of the Somers Yacht Club Inc.
I would like to pr	opose the applicar	nt(S) for members	ship of the Somers Yacht Club inc.
Proposer	S	ignature	Phone
Seconder		Signature	Phone
Note the propos	ser and seconder c	annot come fron	n the same membership
-	d by all other appli		
I /We hereby agr Yacht Club Inc. a	ree that if accepted nd will observe sar	l, I /We will be bo ne.	ound by the rules and regulations of the Somers mary members details will be used.
Name	DOB	Email	Phone No
Name	DOB	Email	Phone No
Name	DOB	Email	Phone No
Name	DOB	Email	Phone No
Return a	Or by em	ail to membership	y, Somers Yacht Club PO Box 129 Somers 3927 @somersyachtclub.com.au he Yacht Club General Committee